	INSURANCE OPIOID REGULATION
	2017 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Raymond P. Ward
	Senate Sponsor:
LONG T	
General	Description:
T	his bill requires commercial insurers, the state Medicaid program, workers'
compensa	ation insurers, and public employee insurers to implement policies to minimize
the risk o	f prescribing certain controlled substances.
Highligh	ted Provisions:
T	nis bill:
•	defines terms;
•	requires a health insurance policy, a health plan offered to state employees, the
Medicaid	program, and workers' compensation insurance to establish policies for
prescribin	ng certain controlled substances;
•	applies to insurance plans entered into or renewed on or after July 1, 2017;
•	requires a report to the Health and Human Services Interim Committee; and
•	sunsets the requirement for prescribing policies on July 1, 2022.
Money A	ppropriated in this Bill:
N	one
Other Sp	ecial Clauses:
N	one
Utah Co	de Sections Affected:
AMEND	S:
63	BI-1-231, as last amended by Laws of Utah 2015, Chapter 50



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28	ENACTS:
29	<b>26-18-21</b> , Utah Code Annotated 1953
30	<b>31A-22-615</b> , Utah Code Annotated 1953
31	34A-2-424, Utah Code Annotated 1953
32 33	<b>49-20-414</b> , Utah Code Annotated 1953
34	Be it enacted by the Legislature of the state of Utah:
35	Section 1. Section 26-18-21 is enacted to read:
36	26-18-21. Prescribing policies for opioid prescriptions.
37	(1) The department shall implement a prescribing policy for certain opioid
38	prescriptions that is substantially similar to the prescribing policies required in Section
39	31A-22-615.
40	(2) The department may amend the state program and apply for waivers for the state
41	program, if necessary, to implement Subsection (1).
42	Section 2. Section 31A-22-615 is enacted to read:
43	31A-22-615. Insurance coverage for opioids Policies Reports.
44	(1) For purposes of this section:
45	(a) "Health care provider" means an individual, other than a veterinarian, who:
46	(i) is licensed to prescribe a controlled substance under Title 58, Chapter 37, Utah
47	Controlled Substances Act; and
48	(ii) possesses the authority, in accordance with the individual's scope of practice, to
49	prescribe Schedule II controlled substances and Schedule III controlled substances that are
50	applicable to opioids and benzodiazapines.
51	(b) "Health insurer" means:
52	(i) an insurer who offers health care insurance as that term is defined in Section
53	<u>31A-1-301;</u>
54	(ii) health benefits offered to state employees under Section 49-20-202; and
55	(iii) a workers' compensation insurer:
56	(A) authorized to provide workers' compensation insurance in the state; or
57	(B) that is a self-insured employer as defined in Section 34A-2-201.
58	(c) "Opioid" has the same meaning as "opiate," as that term is defined in Section

59	<u>58-37-2.</u>
60	(d) "Prescribing policy" means a policy developed by a health insurer that includes
61	evidence based guidelines for prescribing opioids, and may include the 2016 Center for Disease
62	Control Guidelines for Prescribing Opioids for Chronic Pain, or the 2016 Utah Opioid
63	Prescribing Guidelines.
64	(2) A health insurer that provides prescription drug coverage shall enact a prescribing
65	policy to minimize the risk of opioid addiction and overdose from:
66	(a) co-prescription of opioids with benzodiazapines and other sedating substances;
67	(b) prescription of very high dose opioids in the primary care setting; and
68	(c) the inadvertent transition of short-term opioids for an acute injury into long-term
69	opioid $\hat{H} \rightarrow [\frac{\text{dependance}}{\text{dependence}}] \stackrel{\bullet}{\text{dependence}} \leftarrow \hat{H}$ .
70	(3) A health insurer that provides prescription drug coverage shall enact policies to
71	facilitate:
72	(a) non-narcotic treatment alternatives for patients who have chronic pain; and
73	(b) medication-assisted treatment for patients who have opioid dependence disorder.
74	(4) The requirements of this section apply to insurance plans entered into or renewed
75	on or after July 1, 2017.
76	(5) A health insurer subject to this section shall on or before October 1, 2018, and
77	before each October 1 thereafter, report to the Health and Human Services Interim Committee
78	regarding Ĥ→ [:
<b>79</b>	$\underline{\text{(a)}}$ $\leftarrow \hat{H}$ the health insurer's opioid policies as described in Subsections (2) and (3) $\hat{H} \rightarrow [\frac{1}{2}]$
79a	<del>and</del>
80	(b) the health insurer's analysis of whether the prescribing policy has been effective in
81	<u>reducing the risk of opioid addictions and overdoses</u> ] $\leftarrow \hat{H}$ .
82	(5) This section sunsets in accordance with Section 63I-1-231.
83	Section 3. Section 34A-2-424 is enacted to read:
84	34A-2-424. Prescribing policies for certain opioid prescriptions.
85	(1) This section applies to a person regulated by this chapter or Chapter 3, Utah
86	Occupational Disease Act.
87	(2) A self-insured employer, as that term is defined in Section 34A-2-201.5, an
88	insurance carrier, and a managed health care program under Section 34A-2-111 shall
89	implement a prescribing policy for certain opioid prescriptions in accordance with Section

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90	31A-22-615.
91	Section 4. Section 49-20-414 is enacted to read:
92	49-20-414. Prescribing policies for certain opioid prescriptions.
93	A plan offered to state employees under this chapter shall implement a prescribing
94	policy for certain opioid prescriptions in accordance with Section 31A-22-615.
95	Section 5. Section 63I-1-231 is amended to read:
96	63I-1-231. Repeal dates, Title 31A.
97	(1) Section 31A-2-217, Coordination with other states, is repealed July 1, 2023.
98	(2) Section 31A-22-615 is repealed July 1, 2022.
99	[(2)] (3) Section 31A-22-619.6, Coordination of benefits with workers' compensation
100	claimHealth insurer's duty to pay, is repealed on July 1, 2018.
101	[(3) Title 31A, Chapter 29, Comprehensive Health Insurance Pool Act, is repealed July
102	<del>1, 2015.</del> ]
103	(4) Section 31A-22-642, Insurance coverage for autism spectrum disorder, is repealed
104	on January 1, 2019.

Legislative Review Note Office of Legislative Research and General Counsel